مود	KAIENI	Effe	ctive Octo			ION RECO	ORD		09/	8	3/-/	26	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN		
TOTAL CLAIMS								RATE FE		OR 7		· · · · · · · · ·	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC			1	RATE BASIC FE	710 00	
TOTAL CHARGEABLE CLAIMS			20 minus 20=				\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			-	——	1	
INDEPENDENT CLAIMS			2 minus 3 =				X\$		<u> </u>	OR	X\$18=		
M	ULTIPLE DEPE	NDENT CLAIM	1				X40) = ——		OR	X80=	<u> </u>	
<u> </u>	f the difference	o in column A t					+13	5=		OR	+270=		
•	•		less than zero, enter "0" in column			column 2	TOT	AL		OR	TOTAL	1867	
	(AMENDE	MENDED - PART II								THAN	
		(Column 1) CLAIMS		(Colum		(Column 3)	SMAL		NTITY	OR	SMALL	ENTITY	
AMENDMENT A		REMAINING AFTER AMENDMENT	PREVIOU		USLY	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	.40	Minus	1.2c	2	= D	X\$-0	2	300	OR	X\$18=	1	
		Independent Minus		- 3		=	X40:			OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135	┇		OR	+270=		
7	ور رن						TO	AL			TOTAL		
<u>, </u>		(Column 1)		(Colum	ın 2)	(Column 3)	ADDIT, F	EE L		OR	ADDIT. FEE	<u> </u>	
AMENDMENT B		CLAIMS REMAINING		HIGHE	ST			7	ADDI-	l 1		ADDI-	
		AFTER AMENDMENT		PREVIO	USLY	PRESENT EXTRA	RATE		TIONAL FEE		RATE	TIONAL FEE	
	Total Independent	•	Minus	••		=	X\$ 9	-		OR	X\$18=		
		NTATION OF MI	Minus	PENDENT	C1 A104	=	X40=	1		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+270=		
								AL E		OR	TOTAL ADDIT, FEE		
_		(Column 1) CLAIMS		(Colum		(Column 3)				•			
		REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID FO	ER JSLY	PRESENT EXTRA	RATE		ADDI- IONAL		RATE	ADDI- TIONAL	
	Total	•	Minus	••		=	X\$ 9=	+	FEE	ł		FEE	
	independent	f	Minus	***		=	 	╀		OR	X\$18=		
7	FIRST PRESE	NTATION OF MU	X40=	1		OR	X80=						
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+270=		
••if	the "Highest Num	.TOTA ADDIT. FE	E L		OR A	TOTAL DDIT. FEE							
T	18 "Highest Numb	per Previously Paid	For (Total or	Independent) is the I	highest number f	ound in the a	ppro	priate box	in colu	mn 1.		

Application or Docket Number